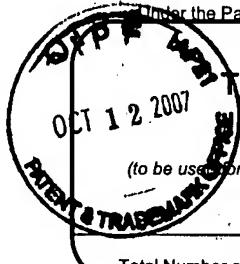


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PTO/SB/21 (02-04)

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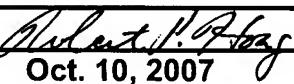
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/676,909
Filing Date	Oct. 1, 2003
First Named Inventor	Harald Kropshofer
Art Unit	1614
Examiner Name	F. Vandervegt
Attorney Docket Number	21388

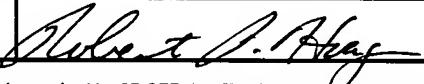
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <div style="border: 1px solid black; padding: 2px; display: inline-block;">Remarks</div>	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Robert P. Hoag
Signature	
Date	Oct. 10, 2007

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Robert P. Hoag
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	Date
	Oct. 10, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application

Confirmation No. 8340

Inventor(s) Kropshofer et al

Group: 1614

Application No. 10/676,909, filed Oct. 1, 2003  
(Case Docket No. 21388)

Examiner: F. Vandervegt

For: **METHOD FOR THE IDENTIFICATION OF ANTIGENIC PEPTIDES**

**AMENDMENT AFTER FINAL**

Nutley, New Jersey 07110  
October 10, 2007

Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This Amendment and Response is filed in response to the Final Office Action mailed July 17, 2007, in connection with the above-identified application.

In response to the Final Office Action mailed July 17, 2007, Claims 1-14 and 17-27 stand pending. Claims 15 and 28-33 stand withdrawn pursuant to restriction requirement. Please amend Claims 1, 6, 13, 14, 22 and 27 as is reflected in the listing of claims beginning on page 2 of this paper.